

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	Jm	101 72223	12/21/00
RESPONSE FORMALITY REVIEW			2/5/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	Original
1	✓ 6-9-01
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	0
11	0
12	0
13	0
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15	0
16	0
17	✓
18	0
19	0
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21	0
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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